


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 23, 1999 8:00 am  
Secretary of State

04-23-1999 90179 009 \*\*\*150.00

0358170

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # P92000014914

1. Corporation Name  
J-T PROPERTY MANAGEMENT, INC.

Principal Place of Business

1061 E INDIANTOWN RD  
STE 104  
JUPITER FL 33477  
US

Mailing Address

1061 E INDIANTOWN RD  
STE 104  
JUPITER FL 33477  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/29/1992

4. FEI Number

65-0377275

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

\$5.00 May Be  
Added to Fees

7. This corporation owes the current year Intangible

Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

GODOWN, S. BARRIE  
351 S U.S. HWY 1  
SUITE 107  
JUPITER FL 33477

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE  
NAME SCHNEIDER, STEVEN L  
STREET ADDRESS 116 QUAYSIDE DR  
CITY-ST-ZIP JUPITER FL 33477

TITLE D ☐ DELETE  
NAME BANSAL, RAJENDRA  
STREET ADDRESS 605 S BEACH RD  
CITY-ST-ZIP JUPITER ISLAND FL

TITLE D ☐ DELETE  
NAME KEHAYA, ERY W  
STREET ADDRESS 247 S BEACH RD  
CITY-ST-ZIP HOBE SOUND FL 33455

TITLE D ☐ DELETE  
NAME KEHAYA, MARK W  
STREET ADDRESS 247 S BEACH RD  
CITY-ST-ZIP HOBE SOUND FL 33455

TITLE D ☐ DELETE  
NAME GODOWN, S. BARRIE  
STREET ADDRESS 1061 E INDIANTOWN RD #104  
CITY-ST-ZIP JUPITER FL

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

561-746-0999  
Daytime Phone #

CR2E034 (11/98)